

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) BlackPAC			FEC IDENTIFICATION NUMBER ▼ C C00609388	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			MM / DD / YYYY	
Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2022		
Mailing Address PO Box 69338		Amount 581112.05		
City Saint Louis	State MO	Zip Code 63169-0338	Transaction ID : VTDG0AGGRN8 Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure Canvassing - Estimate		Category/ Type		
Name of Federal Candidate Fetterman, John, K., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought		2740120.20	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee OTG Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2022		
Mailing Address PO Box 69338		Amount 126578.10		
City Saint Louis	State MO	Zip Code 63169-0338	Transaction ID : VTDG0AGGRP6 Date of Disbursement or Obligation MM / DD / YYYY	
Purpose of Expenditure Canvassing - Estimate		Category/ Type		
Name of Federal Candidate Cortez Masto, Catherine, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought		242261.60	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....		707690.15		
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures.....				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature Shropshire, Adrianne, R., ,		[Electronically Filed]		Date MM / DD / YYYY 11 / 04 / 2022

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Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee Verdugo Strategies LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2022
Mailing Address PO Box 94471		Amount 105348.88
City Pasadena	State CA	Zip Code 91109-4471
Purpose of Expenditure Canvassing - Estimate	Category/Type	Transaction ID : VTDG0AGGW69 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Warnock, Raphael, ,		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	105348.88
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	813039.03

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Shropshire, Adrienne, R., ,***[Electronically Filed]**

Date

MM / DD / YYYY
11 / 04 / 2022

Signature